

B 25C (Official Form 25C) (12/08)

UNITED STATES BANKRUPTCY COURT

In re MICHAEL B. SARACENO,
Debtor

Case No. 13-18784

Small Business Case under Chapter 11

SMALL BUSINESS MONTHLY OPERATING REPORT

Month: OCTOBER 2016

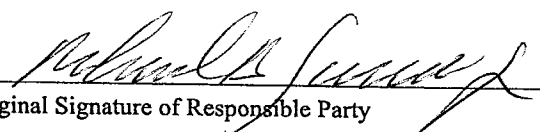
Date filed: _____

Line of Business: RENTALS

NAISC Code: _____

IN ACCORDANCE WITH TITLE 28, SECTION 1746, OF THE UNITED STATES CODE, I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THE FOLLOWING SMALL BUSINESS MONTHLY OPERATING REPORT AND THE ACCOMPANYING ATTACHMENTS AND, TO THE BEST OF MY KNOWLEDGE, THESE DOCUMENTS ARE TRUE, CORRECT AND COMPLETE.

RESPONSIBLE PARTY:


Original Signature of Responsible Party

MICHAEL B. SARACENO
Printed Name of Responsible Party

Questionnaire: (All questions to be answered on behalf of the debtor.)

- | | Yes | No |
|---|-------------------------------------|-------------------------------------|
| 1. IS THE BUSINESS STILL OPERATING? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. HAVE YOU PAID ALL YOUR BILLS ON TIME THIS MONTH? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. DID YOU PAY YOUR EMPLOYEES ON TIME? | <input type="checkbox"/> | <input type="checkbox"/> N/A |
| 4. HAVE YOU DEPOSITED ALL THE RECEIPTS FOR YOUR BUSINESS INTO THE DIP ACCOUNT THIS MONTH? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. HAVE YOU FILED ALL OF YOUR TAX RETURNS AND PAID ALL OF YOUR TAXES THIS MONTH? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. HAVE YOU TIMELY FILED ALL OTHER REQUIRED GOVERNMENT FILINGS? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. HAVE YOU PAID ALL OF YOUR INSURANCE PREMIUMS THIS MONTH? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. DO YOU PLAN TO CONTINUE TO OPERATE THE BUSINESS NEXT MONTH? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. ARE YOU CURRENT ON YOUR QUARTERLY FEE PAYMENT TO THE U.S. TRUSTEE? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. HAVE YOU PAID ANYTHING TO YOUR ATTORNEY OR OTHER PROFESSIONALS THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11. DID YOU HAVE ANY UNUSUAL OR SIGNIFICANT UNANTICIPATED EXPENSES THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. HAS THE BUSINESS SOLD ANY GOODS OR PROVIDED SERVICES OR TRANSFERRED ANY ASSETS TO ANY BUSINESS RELATED TO THE DIP IN ANY WAY? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 13. DO YOU HAVE ANY BANK ACCOUNTS OPEN OTHER THAN THE DIP ACCOUNT? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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14. HAVE YOU SOLD ANY ASSETS OTHER THAN INVENTORY THIS MONTH?
15. DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH?
16. HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH?
17. HAS ANYONE MADE AN INVESTMENT IN YOUR BUSINESS THIS MONTH?
18. HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY?

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TAXES

DO YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX OBLIGATIONS?

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IF YES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR THE PAYMENT.

(Exhibit A)

INCOME

PLEASE SEPARATELY LIST ALL OF THE INCOME YOU RECEIVED FOR THE MONTH. THE LIST SHOULD INCLUDE ALL INCOME FROM CASH AND CREDIT TRANSACTIONS. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL INCOME \$ 10,500.00

SUMMARY OF CASH ON HAND

Cash on Hand at Start of Month

\$ —

Cash on Hand at End of Month

\$ —

PLEASE PROVIDE THE TOTAL AMOUNT OF CASH CURRENTLY AVAILABLE TO YOU TOTAL \$ 10,500.00

(Exhibit B)

EXPENSES

PLEASE SEPARATELY LIST ALL EXPENSES PAID BY CASH OR BY CHECK FROM YOUR BANK ACCOUNTS THIS MONTH. INCLUDE THE DATE PAID, WHO WAS PAID THE MONEY, THE PURPOSE AND THE AMOUNT. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL EXPENSES \$ 11,481.48

(Exhibit C)

CASH PROFIT

INCOME FOR THE MONTH (TOTAL FROM EXHIBIT B)

\$ 10,500.00

EXPENSES FOR THE MONTH (TOTAL FROM EXHIBIT C)

\$ 11,481.48

(Subtract Line C from Line B)

CASH PROFIT FOR THE MONTH

\$ -981.48

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UNPAID BILLS

PLEASE ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) WHICH YOU HAVE INCURRED SINCE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DATE THE DEBT WAS INCURRED, WHO IS OWED THE MONEY, THE PURPOSE OF THE DEBT AND WHEN THE DEBT IS DUE. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL PAYABLES \$ 0

(Exhibit D)

MONEY OWED TO YOU

PLEASE ATTACH A LIST OF ALL AMOUNTS OWED TO YOU BY YOUR CUSTOMERS FOR WORK YOU HAVE DONE OR THE MERCHANDISE YOU HAVE SOLD. YOU SHOULD INCLUDE WHO OWES YOU MONEY, HOW MUCH IS OWED AND WHEN IS PAYMENT DUE. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

EDUARDO VALAQUEZ PAST DUE
LUGINA CALLOWAY

TOTAL RECEIVABLES \$ 3400.00

(Exhibit E)

BANKING INFORMATION

PLEASE ATTACH A COPY OF YOUR LATEST BANK STATEMENT FOR EVERY ACCOUNT YOU HAVE AS OF THE DATE OF THIS FINANCIAL REPORT OR HAD DURING THE PERIOD COVERED BY THIS REPORT.

(Exhibit F)

EMPLOYEES

NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED?

NUMBER OF EMPLOYEES AS OF THE DATE OF THIS MONTHLY REPORT?

N/A
N/A

PROFESSIONAL FEES

BANKRUPTCY RELATED:

PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD?

\$ 0

TOTAL PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE?

\$ 0

NON-BANKRUPTCY RELATED:

PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD?

\$ 0

TOTAL PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE?

\$ 0

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PROJECTIONS

COMPARE YOUR ACTUAL INCOME AND EXPENSES TO THE PROJECTIONS FOR THE FIRST 180 DAYS OF YOUR CASE PROVIDED AT THE INITIAL DEBTOR INTERVIEW.

	Projected	Actual	Difference
INCOME	\$ _____	\$ <u>10,500.00</u>	\$ _____
EXPENSES	\$ _____	\$ <u>11,481.48</u>	\$ _____
CASH PROFIT	\$ _____	\$ _____	\$ _____

TOTAL PROJECTED INCOME FOR THE NEXT MONTH:

\$ 10,500.00

TOTAL PROJECTED EXPENSES FOR THE NEXT MONTH:

\$ 11,481.48

TOTAL PROJECTED CASH PROFIT FOR THE NEXT MONTH:

\$ _____

ADDITIONAL INFORMATION

PLEASE ATTACH ALL FINANCIAL REPORTS INCLUDING AN INCOME STATEMENT AND BALANCE SHEET WHICH YOU PREPARE INTERNALLY.

01/30/2016

Sorensen, Michael B. Jr.
Debtor
Creditor Payout Schedule - By Month

Creditor	Payment	Principal	Interest	Pd to Date	Remaining
✓ Bank Of America	166.75	166.75		1,632.09	78,367.91
✓ Chase <i>SBA</i>	85.15	85.15		833.42	40,017.58
✓ Chase Home Finance <i>Caliber</i>	166.75	166.75		1,632.09	78,367.91
City Of Allentown	4.75	4.75		46.49	2,233.58
✓ Discover	18.66	18.66		182.63	8,767.73
Springleaf Financial Services	31.27	31.27		306.06	14,693.94
✓ Susquehanna Bank	416.89	416.89		4,080.36	195,919.64
✓ Wells Fargo Home Mortgage	72.96	72.96		714.10	34,285.90
Total	1,100.00				
Month 16					
Trustee Fee	110.00			1,760.00	
✓ BArclays Bank Of Delawre	26.82	26.82		289.33	12,579.47
✓ Bank Of America <i>(SBA)</i>	166.75	166.75		1,798.84	78,201.16
✓ Chase	85.15	85.15		918.57	39,932.43
✓ Chase Home Finance <i>Caliber</i>	166.75	166.75		1,798.84	78,201.16
City Of Allentown	4.75	4.75		51.24	2,228.83
✓ Discover	18.66	18.66		201.29	8,749.07
Springleaf Financial Services	31.27	31.27		337.33	14,662.67
✓ Susquehanna Bank	416.89	416.89		4,497.25	195,502.75
✓ Wells Fargo Home Mortgage	72.96	72.96		787.06	34,212.94
Total	1,100.00				
Month 17					
Trustee Fee	110.00			1,870.00	
✓ BArclays Bank Of Delawre	26.82	26.82		316.15	12,552.65
✓ Bank Of America <i>SBA</i>	166.75	166.75		1,965.59	78,034.41
✓ Chase	85.15	85.15		1,003.72	39,847.28
✓ Chase Home Finance <i>Caliber Home</i>	166.75	166.75		1,965.59	78,034.41
City Of Allentown	4.75	4.75		55.99	2,224.08
✓ Discover	18.66	18.66		219.95	8,730.41
Springleaf Financial Services	31.27	31.27		368.60	14,631.40
✓ Susquehanna Bank	416.89	416.89		4,914.14	195,085.86
✓ Wells Fargo Home Mortgage	72.96	72.96		860.02	34,139.98
Total	1,100.00				
Month 18					
Trustee Fee	110.00			1,980.00	
BArclays Bank Of Delawre	26.82	26.82		342.97	12,525.83
Bank Of America <i>SBA</i>	166.75	166.75		2,132.34	77,867.66
Chase	85.15	85.15		1,088.87	39,762.13
Chase Home Finance	166.75	166.75		2,132.34	77,867.66
City Of Allentown	4.75	4.75		60.74	2,219.33
Discover	18.66	18.66		238.61	8,711.75
Springleaf Financial Services	31.27	31.27		399.87	14,600.13
Susquehanna Bank	416.89	416.89		5,331.03	194,668.97
Wells Fargo Home Mortgage	72.96	72.96		932.98	34,067.02
Total	1,100.00				
Month 19					
Trustee Fee	110.00			2,090.00	

953.95
Each Month



November 17, 2016

31 T 0474 0000 R 52 AO

MICHAEL B SARACENO JR
DEBTOR IN POSSESSION
4507 SCHEIDYS RD
COPLAY PA 18037-2426Questions about your account?
1-800-KEY2YOU (1-800-539-2968)Or, write us:
KeyBank National Association
P.O. Box 94825
Cleveland, Ohio 44101

Get less mail and enroll in Online Statements today!



Key Express Checking

Account number: 7806214453

Account title: MICHAEL B SARACENO JR
DEBTOR IN POSSESSION

Balance on Oct 19, 2016	\$8,507.10
Additions	
Deposits	10,406.40
Deductions	
Withdrawals	10,527.50
Checks paid	855.33
Balance on Nov 17, 2016	\$7,530.67

Deposits

Date	Description	Amount
10-20	Deposit Branch 0474 New York	\$600.00
10-28	Deposit Branch 0474 New York	800.00
11-1	Deposit Branch 0474 New York	500.00
11-1	Deposit Branch 0474 New York	720.00
11-4	Deposit Branch 0474 New York	1,674.00
11-9	Direct Deposit, Ssa Treas 310 Xxsoc Sec	1,859.40
11-15	Deposit Branch 0474 New York	1,403.00
11-15	Deposit Branch 0474 New York	1,600.00
11-16	Deposit Branch 0474 New York	1,250.00
Total		\$10,406.40





November 17, 2016

Withdrawals

Date	Description	Amount
10-31	Withdrawal Branch 0474 New York	\$8,919.65
11-8	Direct Withdrawal, Aetna Life Insurins Pymt	143.58
11-15	Bill Pay:Ugi Utilities, Inc 514812 Kbz9Zxai	8.72
11-15	Bill Pay:Ugi Utilities, Inc 514812 Wb29Zxai	8.72
11-15	Bill Pay:Pennsylvania Power 758200 1Bs98Xai	29.45
11-15	Bill Pay:Capital One Bank 517805 Ebg9Jxai	55.09
11-15	Bill Pay:Pennsylvania Power 906956 9Bo9Kxai	85.24
11-15	Bill Pay:Lehigh County Auth 544777 1Bl9Wxai	121.41
11-15	Bill Pay:Pennsylvania Power 906956 Zb19Kxai	126.43
11-15	Bill Pay:Lehigh County Auth 47434 9B79Mxai	199.80
11-15	Bill Pay:Lehigh County Auth 47432 Uba9Wxai	252.82
11-15	Bill Pay:Lehigh County Auth 45316 3B29Lxai	276.59
11-16	Bill Pay:Capital One Bank 517805 Ybh9lx7l	300.00
Total		\$10,527.50

Checks paid

* Indicates a break in numeric sequence

Number	Date	Trace ID	Amount	Number	Date	Trace ID	Amount
240	10-25	61338641	\$166.25	243	10-24	61929319	106.62
241	10-24	65059874	144.16	244	10-31	28611168	325.00
242	10-21	28557554	113.30				
				Total			\$855.33



KeyNotes

